FORM D

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UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549



1393437

FORM D

NOTICE OF SALE OF SECURITIES PURSUANT TO REGULATION D, **SECTION 4(6), AND/OR** UNIFORM LIMITED OFFERING EXEMPTION

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	nours per resp	JOHSE
Prefix Serial	SEC USI	E ONLY
	Prefix	Serial
	DATE RE	CEIVED

	MAIL
Name of Offering (check if this is an amendment and name has changed, and indicate change.)	SEE MECEINEO CO
Falcon Stock Index Fund, LP	
Filing Under (Check box(es) that apply): Rule 504 Rule 505 Rule 506 Section 4(6) Type of Filing: New Filing Amendment	ULOE MAR 2007
A. BASIC IDENTIFICATION DATA	[o]
1. Enter the information requested about the issuer	15/186 ECTION
Name of Issuer (check if this is an amendment and name has changed, and indicate change.)	
Falcon Stock Index Fund, LP	
Address of Executive Offices (Number and Street, City, State, Zip Code)	Telephone Number (Including Area Code)
141 W. Jackson Boulevard, Suite 3332, Chicago, Illinois 60604	
Address of Principal Business Operations (Number and Street, City, State, Zip Code) (if different from Executive Offices)	Telephone Number (Including Area Code)
Brief Description of Business	PROCESSED
Speculative investing in commodity futures and options thereon	
Type of Business Organization	MAR 1-9 2007
	lease specify):
business trust Imited partnership, to be formed	THOMSON
Month Year	FINANCIAL
Actual or Estimated Date of Incorporation or Organization: 03 07 Actual Estin Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State	
CN for Canada; FN for other foreign jurisdiction)	

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When To File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where To File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

- ATTENTION-

Failure to tile notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predictated on the filing of a federal notice.

> Persons who respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

2. E	nter the information i	requested for the fo		ENTIFICATION DATA								
•	• Each promoter of the issuer, if the issuer has been organized within the past five years;											
•	Each beneficial or	wner having the po	wer to vote or dispose, or di	rect the vote or disposition	of, 10% or more o	f a clas	ss of equity securities					
•	Each executive of	fficer and director	of corporate issuers and of	corporate general and ma	naging partners of	partne	ership issuers; and					
•	Each general and	managing partner	of partnership issuers.									
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director	Ø	General and/or Managing Partne					
	ame (Last name first, n Trading Partners	•										
			l Street, City, State, Zip Co Chicago, Illinois 60604									
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partne					
Full Na	ame (Last name first,	if individual)										
Brand	tolino, James											
			Street, City, State, Zip Co	ode)		*						
			Chicago, Illinois 60604				<u> </u>					
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partne					
Full Na	ame (Last name first,	if individual)										
Busine	ss or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)								
Check	Box(cs) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partne					
Full Na	ame (Last name first,	if individual)										
Busine	ss or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode) .								
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partne					
Full Na	ame (Last name first,	if individual)				_						
Busine	ss or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)		••••						
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partne					
Full Na	ame (Last name first,	if individual)				-	47-177-					
Busine	ss or Residence Addr	ess (Number and	Street, City, State, Zip Co	ode)			<u>. </u>					
Check	Box(es) that Apply:	Promoter	Beneficial Owner	Executive Officer	Director		General and/or Managing Partne					
Full Na	ame (Last name first,	if individual)										
Ducin-	er or Dacidanaa 333-	ang (Nigerhan ::	Strant City Carte Vi C	oda)								
musind	ss or Residence Addr	ess (Number and	l Street, City, State, Zip Co	out)								

					B. 18	NFORMAT	ION ABOU	T OFFERI	NG				
1.	Has the	issuer sold	, or does th			ll. to non-a						Yes X	No =
2	Answer also in Appendix, Column 2, if filing under ULOE. What is the minimum investment that will be accepted from any individual?											. 50,	00.00
2.	what is the minimum investment that will be accepted from any individual?										*************	Yes	No
3.	Does the offering permit joint ownership of a single unit?											K	
4.	4. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only. Full Name (Last name first, if individual)												
	•		first, if indi	•									
		*			I Street, Ci	ity, State, 7	Cip Code)						
Nai	me of Ass	ociated Br	oker or Dea	aler									
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)				***************	***************************************	••••••	□ A1	l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	ME NY VT	MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR
Ful	l Name (last name	first, if indi	ividual)					<u></u>				
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, 2	Zip Code)						
Nai	me of Ass	ociated Br	oker or De	aler									V7-7-
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)	·····		,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	******************	****************			l States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	HI MS OR WY	MO PA PR
Ful	l Name (Last name	first, if indi	ividual)									
Bus	siness or	Residence	Address (1	Number an	d Street, C	ity, State, I	Zip Code)						
Nai	me of Ass	ociated Br	oker or De	aler				·			· <u> </u>		-,
Sta	tes in Wh	ich Person	Listed Has	s Solicited	or Intends	to Solicit	Purchasers						
	(Check	"All States	" or check	individual	States)				********	***************************************	••••••	☐ Al	States
	AL IL MT	AK IN NE SC	AZ IA NV SD	AR KS NH TN	CA KY NJ TX	CO LA NM UT	CT ME NY VT	DE MD NC VA	DC MA ND WA	FL MI OH WV	GA MN OK WI	MS OR WY	MO PA PR

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if the answer is "none" or "zero." If the transaction is an exchange offering, check this box and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.		
	Type of Security	Aggregate Offering Price	Amount Already Sold
	Debt	\$	\$
	Equity	\$	\$
	Common Preferred		
	Convertible Securities (including warrants)	5	\$
	Partnership Interests		\$
	Other (Specify)		
	Total	250,000.00	\$ 0.00
	Answer also in Appendix, Column 3, if filing under ULOE.		
2.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."		Aggregate
		Number Investors	Dollar Amount of Purchases
	Accredited Investors		\$
	Non-accredited Investors		\$
	Total (for filings under Rule 504 only)		\$
	Answer also in Appendix, Column 4, if filing under ULOE.		
3.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C — Question 1.		
	Type of Offering	Type of Security	Dollar Amount Sold
	Rule 505		\$
	Regulation A		\$
	Rule 504		\$
	Total		\$ 0.00
4	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the insurer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.		
	Transfer Agent's Fees		\$
	Printing and Engraving Costs		\$
	Legal Fees		\$_8,000.00
	Accounting Fees	_	
	Engineering Fees		
	Sales Commissions (specify finders' fees separately)	_	
	Other Expenses (identify) filing fees	_	2.000.00
	Total	_	40.000.00

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G. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND A	USE OF PROCEEDS	
b. Enter the difference between the aggregate offering price given in response to Part C — Quand total expenses furnished in response to Part C — Question 4.a. This difference is the "adjust proceeds to the issuer."	sted gross	\$ 240,000.00
Indicate below the amount of the adjusted gross proceed to the issuer used or proposed to be each of the purposes shown. If the amount for any purpose is not known, furnish an estin check the box to the left of the estimate. The total of the payments listed must equal the adjust proceeds to the issuer set forth in response to Part C — Question 4.b above.	mate and	
	Payments to Officers, Directors, & Affiliates	Payments to Others
Salaries and fees		\$ 12,000.00
Purchase of real estate		
Purchase, rental or leasing and installation of machinery		
and equipment		- 🗀 🌣
Acquisition of other businesses (including the value of securities involved in this	[] \$	_ 📙 \$
offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger)	7 .	
Repayment of indebtedness		
Working capital		. 🗆 \$
Other (specify): capital for speculative investing in commodity futures and options there	eon	
		N 2 223,200.00
		. 🗆 \$
Column Totals	\$ 4,800.00	235,200.00
Total Payments Listed (column totals added)		10,000.00
D. FEDERAL SIGNATURE		
e issuer has duly caused this notice to be signed by the undersigned duly authorized person. If the nature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange information furnished by the issuer to any non-accredited investor pursuant to paragraph (b	Commission, upon writte	le 505, the following in request of its staff,
uer (Print or Type) Signature	Date	
alcon Stock Index Fund, LP	2-28	-07
me of Signer (Print or Type) Title of Signer (Print or Type)		

- ATTENTION --

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)

E. STATE SIGNATURE	are di	
Is any party described in 17 CFR 230.262 presently subject to any of the disqualification provisions of such rule?	Yes	No Æ

See Appendix, Column 5, for state response.

- The undersigned issuer hereby undertakes to furnish to any state administrator of any state in which this notice is filed a notice on Form D (17 CFR 239.500) at such times as required by state law.
- 3. The undersigned issuer hereby undertakes to furnish to the state administrators, upon written request, information furnished by the issuer to offerees.
- 4. The undersigned issuer represents that the issuer is familiar with the conditions that must be satisfied to be entitled to the Uniform limited Offering Exemption (ULOE) of the state in which this notice is filed and understands that the issuer claiming the availability of this exemption has the burden of establishing that these conditions have been satisfied.

The issuer has read this notification and knows the contents to be true and has duly caused this notice to be signed on its behalf by the undersigned duly authorized person.

Issuer (Print or Type)	Signature Date
Falcon Stock Index Fund, LP	Jun 1 7 -28-07
Name (Print or Type)	Title (Print or Type)
James Brandolino	President of Falcon Capital Partners Inc., General Partner

Instruction

Print the name and title of the signing representative under his signature for the state portion of this form. One copy of every notice on Form D must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

APPENDIX 1 2 3 4 Disqualification under State ULOE Type of security Intend to sell and aggregate (if yes, attach Type of investor and amount purchased in State offering price explanation of to non-accredited offered in state waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors No Amount **Investors** Amount Yes AL AK AZARCA CO CT DE DC FL GA Н ID IL IN IA KS KY LA ME MD MA ΜI MNMS

APPENDIX 2 3 4 1 Disqualification Type of security under State ULOE Intend to sell and aggregate (if yes, attach to non-accredited offering price Type of investor and explanation of offered in state amount purchased in State waiver granted) investors in State (Part C-Item 1) (Part C-Item 2) (Part E-Item 1) (Part B-Item 1) Number of Number of Accredited Non-Accredited State Yes No Investors Amount Investors Amount Yes No MO MT NE NV NH NJ NMNYNC ND OHOK OR PA RI SC SD TN TXUT VTVA WA WV WI

	APPENDIX									
I	2		3		4					
	to non-a	I to sell accredited is in State I-Item 1)	Type of security and aggregate offering price offered in state (Part C-Item 1)	Type of investor and amount purchased in State (Part C-Item 2)		under Sta (if yes, explan waiver	lification ate ULOE , attach ation of granted) -Item 1)			
State	Yes	No		Number of Accredited Investors	Amount	Number of Non-Accredited Investors	Amount	Yes	No	
WY		ş' -								
PR										